

**NEW HIRE/NEW HIRE-PRIOR SERVICE  
PERMANENT PART-TIME POSITION CHECKLIST**

**Name:**

**Social Security Number:**

**Position:**

**Dept/Bur/Div:**

**PRE-EMPLOYMENT PROCESSING**

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| <p><input type="checkbox"/> Personnel Requisition</p> <p><input type="checkbox"/> I.N.S. (Form I-9) Attachments</p> <p><input type="checkbox"/> Pre-employment Medical Exam Form</p> <p><input type="checkbox"/> Pre-employment ID Processing Request</p> | <p><input type="checkbox"/> ~ If Applicable:</p> <p>_____ Management Appointment Letter</p> <p>_____ Request for Exception to Step Placement Policy</p> <p>_____ Authorization to Hire a Minor</p> <p>_____ Request for Background Information</p> |
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**EMPLOYMENT PROCESSING**

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| <p><input type="checkbox"/> Employee Data</p> <p>_____ New Employee Data Form</p> <p>_____ HR-1 Form</p><br><p><input type="checkbox"/> ID Processing</p> <p>_____ D.O.J. Clearance</p><br><p><input type="checkbox"/> Tax Withholding</p> <p>_____ Federal/State Tax Form</p><br><p><input type="checkbox"/> Pension System (if eligible)</p> <p>_____ PERS Membership Form</p> <p>_____ Special Power of Attorney Form and Info/Instruction Sheet</p><br><p><input type="checkbox"/> Voluntary Deductions/Information</p> <p>_____ Charities</p> <p>_____ Child Support</p> <p>_____ Credit Union</p> <p>_____ Deferred Compensation</p> <p>_____ Education Reimbursement</p> <p>_____ Employee Organization</p> <p>_____ Flexible Spending</p> <p>_____ U.S. Savings Bonds</p><br><p><input type="checkbox"/> Safety</p> <p>_____ New Employee Safety Orientation Form</p> <p>_____ CLB Safety Training Assessment</p> <p>_____ DMV Driving Record Release Form<br/>(Employees driving for the City ONLY)</p> | <p><input type="checkbox"/> Insurance Information</p> <p>_____ In-Lieu Health Insurance Payment</p><br><p><input type="checkbox"/> Workers' Compensation</p> <p>_____ Pamphlet</p> <p>_____ Memo-Treatment by Personal Physician</p> <p>_____ Signature From</p><br><p><input type="checkbox"/> Handouts/Information</p> <p>_____ Accident Procedure (Wallet Card)</p> <p>_____ Bus Pass Program Flyer</p> <p>_____ Direct Deposit Form</p> <p>_____ Emergency Action Plan</p> <p>_____ Ethics Handbook</p> <p>_____ New Employee Orientation</p> <p>_____ ~ Update Attendance List</p><br><p><input type="checkbox"/> Policies/Signature Forms</p> <p>_____ Alcohol &amp; Drug Usage Policy</p> <p>_____ Discrimination Complaints</p> <p>_____ Unlawful Harassment Complaints</p> <p>_____ Computer and Technology Systems Security</p> <p>_____ Workplace Threats and Violence</p> <p>_____ Code of Ethics</p> <p>_____ Election to Receive/Not Receive Public Records</p> <p>_____ Memo - Acknowledging receipt of above policies</p> <p>_____ Injury &amp; Illness Prevention Plan</p><br><p>~ If Applicable:</p> <p>_____ Auto Allowance Form</p> <p>_____ Civic Center Parking Memo</p> <p>_____ ~ Update Waiting List</p> <p>_____ Collateral Employment Form</p> |
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